



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee UA Neighbors for Good Government				
Full Name of Contributor Angela Lanctot			Registration Number, if PAC	
Street Address 3974 Patricia Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 10/25/2017	Amount \$100.00
Full Name of Contributor Joel Lilly			Registration Number, if PAC	
Street Address 2030 Tremont Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Venmo
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/26/2017	Amount \$100.00
Full Name of Contributor David DeCapua			Registration Number, if PAC	
Street Address 2279 Canterbury Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/26/2017	Amount \$1000.00
Full Name of Contributor Michael Kenney			Registration Number, if PAC	
Street Address 2072 Tremont Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/27/2017	Amount \$1000.00
Full Name of Contributor Nicholas King			Registration Number, if PAC	
Street Address 2730 Abington Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/27/2017	Amount \$1000.00

*Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Page Total \$3200.00